

OAHU COMMITTEES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND COMMITTEES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

FOR OFFICE USE ONLY

REG. NO.

2004 SEP -3 PM 4:35

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name: (Must be same as on Form CC-1)

Chris Halford

(b) Committee Name:

Friends for Halford

(c) Mailing Address:

P.O. Box 1022
Puunene HI 96784

(d) Phone: (Bus)

(Res)

877-7221

Treasurer's

SECTION II-TYPE OF REPORT AND REPORTING PERIOD:

Check Appropriate Box(es) 7-1-04 through 9-3-04

☐ 1st Preliminary Primary

☐ Amended

☒ 2nd Preliminary Primary

☐ Short Form (11-212)

☐ Final Primary

☐ Short Form (11-213)

☐ Preliminary General

☐ Final General

☐ Supplemental

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section III (Part 2) on the Back of this Form Before Completing This Section)

| | COLUMN A TOTAL THIS PERIOD | COLUMN B ELECTION PERIOD TOTAL TO DATE |
|--|-------------------------------|--|
| 1. Cash on Hand at Beginning of Election Period (Continuing Committee) OR at the time Form CC-1 was Filed (New Committee)..... | | 1978.33 |
| 2. Cash on Hand at Beginning of this Reporting Period..... | 7895.69 | |
| 3. Total Receipts with Loans (From Line 17, Column A and B)..... | 2145.00 | 9870.00 |
| 4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)..... | 10,040.69 | 11,848.33 |
| 5. Subtotal Disbursements (From Line 21, Column A and B)..... | 2448.57 | 4256.21 |
| 6. Cash on Hand at Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B)..... | 7592.12 | 7592.12 |
| 7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at Beginning of this Reporting Period..... | 0 | |
| (b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A)..... | 0 | |
| (c) Total of Expenditures and Fundraising Expenditures (Unpaid) at Closing of this Reporting Period (Add Lines 7(a) and 7(b))..... | 0 | |
| 8. Total of Loans at Closing of this Reporting Period (Schedule E, Line 10)..... | 303.74 | |
| 9. Debts Owed BY the Candidate Committee at Closing of this Reporting Period (Add Lines 7(c) and 8)..... | 303.74 | |
| 10. Other Adjustments to Surplus/Deficit (Attach Explanation)..... | 0 | |
| 11. Subtotal (Add Lines 9 and 10)..... | 303.74 | |
| 12. Surplus/Deficit (Subtract Line 11 from Line 6)..... | 7288.38 | |

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate

Date

Treasurer

Date

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

SCHEDULE A

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100
CANDIDATE COMMITTEE**

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

Chris Halford

Friends for Halford

| DATE OF RECEIPT AND/OR DEPOSIT | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE | NAME OF EMPLOYER (IF INDIVIDUAL) | AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD | AGGREGATE ELECTION PERIOD TOTAL TO DATE |
|--------------------------------|---|----------------------------------|--|---|
| | IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL) | OCCUPATION (IF INDIVIDUAL) | | |
| 7-13-04 | <input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | Jean E. Rolles 3087 La Pietra Circle Honolulu HI 96816 | | 300. | 300. |
| | | | | |
| 8-23-04 | <input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | District 12 Republican Committee 2810 Kekaulike Ave. Kula HI 96790 | | 300. | 300. |
| | | | | |
| 9-1-04 | <input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | Maui County Republican Party District 11 Kihei HI 96753 | | 1000. | 1000. |
| | | | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | | | | |
| | | | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | | | | |
| | | | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | | | | |
| | | | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | | | | |
| | | | | |

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

1600.

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD

(LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....

1600.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS

**COLUMN A
TOTAL THIS PERIOD**

**COLUMN B
ELECTION PERIOD
TOTAL TO DATE**

| | | | |
|--|---------|---------|------------|
| 11. Contributions From: | | | 11 |
| (a) Individuals/Other Entities/Noncandidate Committees/Political Parties | | | 11(a) |
| (i) Monetary and Non-Monetary Contributions of \$100 or Less..... | 545. | 3870. | 11(a)(i) |
| (ii) Monetary and Non-Monetary Contributions of More Than \$100..... | 1600. | 6000. | 11(a)(ii) |
| (iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii))..... | 2145. | 9870. | 11(a)(iii) |
| (b) Candidate or Candidate's Immediate Family | | | 11(b) |
| (i) Monetary and Non-Monetary Contributions of \$100 or Less..... | | | 11(b)(i) |
| (ii) Monetary and Non-Monetary Contributions of More Than \$100..... | | | 11(b)(ii) |
| (iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii))..... | | | 11(b)(iii) |
| 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii))..... | | | 12 |
| 13. Public Funds and Other Receipts..... | | | 13 |
| 14. Loans..... | | | 14 |
| 15. Total Receipts (Add Lines 12 through 14)..... | 2145. | 9870. | 15 |
| DISBURSEMENTS | | | |
| 16. Expenditures..... | 2448.57 | 4256.21 | 16 |
| 17. Loans Repaid or Forgiven..... | 0 | 0 | 17 |
| 18. Unpaid Expenditures Paid or Forgiven..... | 0 | 0 | 18 |
| 19. Subtotal Disbursements (Add Lines 16 through 18)..... | 2448.57 | 4256.21 | 19 |
| 20. Unpaid Expenditures..... | 0 | | 20 |
| 21. Total Disbursements (Add Lines 19 and 20)..... | 2448.57 | 4256.21 | 21 |

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

Chris Halford Friends for Halford

| DATE OF EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------|--|---|--|
| 9-1-04 | Gilbert Associates 360 Hoochana St., #A 202 Kahului HI 96732 | advertising | 2083.32 |
| 7-30-04 | American Savings | bank charges new checks | 7.25 |
| 7-13-04 | American Savings | Cash for Kinko's card for photo-copies | 20.00 |
| 7-10-04 | Chris Halford | reimbursement for lunch - candidate and treasurer | 23.16 |
| 8-11-04 | Capital One Services | airfare and hotel for Treasurer's Training at GOP headquarters | 314.84 |
| | | | |
| | | | |

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE).....

2448.57

2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 4).....

none

3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18, COLUMN A).....

2448.57

Form CC-5(B) (7/95)

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION
SCHEDULE E
LOANS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

Chris Halford *Friends for Halford*

CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY

| DATE OF LOAN | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY MEMBER | AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD | NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD | LOAN REPAYMENT THIS PERIOD | AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD |
|--------------|---|--|---|----------------------------|--|
| 11-2-98 | Candidate | 303.74 | 0 | 0 | 303.74 |
| | | | | | |

| | | |
|--|---|--------|
| 1. TOTAL OF LOANS FROM CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 16(a), COLUMN A)..... | 0 | |
| 2. TOTAL OF LOAN REPAYMENTS FOR CANDIDATE AND CANDIDATE'S IMMEDIATELY FAMILY THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(a), COLUMN A)..... | 0 | |
| 3. TOTAL OF LOANS FROM CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY AT CLOSING OF THIS REPORTING PERIOD..... | | 303.74 |

FINANCIAL INSTITUTIONS

| DATE OF LOAN | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF FINANCIAL INSTITUTIONS | AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD | NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD | LOAN REPAYMENT THIS PERIOD | AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD |
|--------------|---|--|---|----------------------------|--|
| | | | | | |
| | | | | | |

| | | |
|--|--|--|
| 4. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 16(b), COLUMN A)..... | | |
| 5. TOTAL OF LOAN REPAYMENTS FOR FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(b), COLUMN A)..... | | |
| 6. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS AT CLOSING OF THIS REPORTING PERIOD..... | | |

OTHER LOANS

| DATE OF LOAN | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF OTHER LOANS | AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD | NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD | LOAN REPAYMENT THIS PERIOD | AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD |
|--------------|--|--|---|----------------------------|--|
| | | | | | |
| | | | | | |

| | | |
|---|--|--|
| 7. TOTAL OF LOANS FROM SOURCE OF OTHER LOANS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 16(c), COLUMN A)..... | | |
| 8. TOTAL OF LOAN REPAYMENTS FOR SOURCE OF OTHER LOANS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(c), COLUMN A)..... | | |
| 9. TOTAL OF LOANS FROM SOURCE OF OTHER LOANS AT CLOSING OF THIS REPORTING PERIOD..... | | |
| 10. TOTAL OF LOANS AT CLOSING OF THIS REPORTING PERIOD (ADD LINES 3, 6 AND 9 AND ENTER TOTAL ON FORM CC-5, SECTION III (PART 1), LINE 8)..... | | |